

03-16-05

3611 *etc*



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Mary M. DaRif, et al.

) Examiner: Brian K. Green

)

Attorney Docket No.: 6962

) Group Art Unit: 3611

)

Serial No.: 10/026,041

)

Filing Date: 12/21/2001

)

For: PAINT COLOR CARD
AND METHODS OF USING
THE SAME

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Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO OFFICE ACTION

Dear Sir:

This Response to Office Action is filed in response to the Office Action dated November 30, 2004. The three-month shortened statutory period for responding to the Office Action expired on February 28, 2005. As such, Applicant hereby requests a one-month extension of time under 37 C.F.R. 1.136 in which to file this Response. The Commissioner is hereby authorized to charge the one-month extension fee of \$120.00 to Deposit Account No. 19-2025. The Commissioner is also hereby authorized to charge any additional fees, or credit any overpayments, to Deposit Account No. 19-2025.

EV091946520US

AMENDMENT TRANSMITTAL LETTER (Large Entity)Applicant(s): **Mary M. DaRif, et al.**

Docket No.

6962

Application No.

10/026,041

Filing Date

12/21/2001

Examiner

Brian K. Green

Customer No.

Group Art Unit

3611

Confirmation No.

Invention:

PAINT COLOR CARD AND METHODS OF USING THE SAME**COMMISSIONER FOR PATENTS:**

Transmitted herewith is an amendment in the above-identified application.

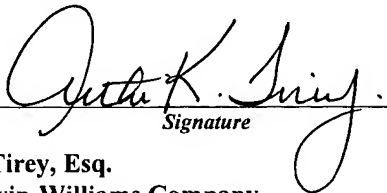
The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	17 -	24 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	2 -	3 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

- ☒ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of _____
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account **19-2025**
- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
- ☐ Any patent application processing fees under 37 CFR 1.17.
- ☐ Payment by credit card. Form PTO-2038.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.


Signature

Arthi K. Tirey, Esq.
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Phone: (216) 566-3650

Dated: **March 15, 2005**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on

(Date)

Signature of Person Mailing Correspondence

Typed or Printed Name of Person Mailing Correspondence

CC: